Case 17-03698 Doc 1 Filed 02/08/17 Entered 02/08/17 15:34:49 Desc Main Document Page 1 of 75

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Elaine First name V Middle name Sykes Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Elaine V. Jones	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3871	

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Case number (if known)

Debtor 1 Elaine V Sykes

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
		■ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	2042 E. 82md Street	If Debtor 2 lives at a different address:			
		2042 E. 83rd Street Chicago, IL 60617				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
ò.	Why you are choosing this district to file for	Check one:	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Elaine V Sykes

ar	Tell the Court About	Your E	3ankruptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are				of each, see Notice Required by	v 11 U.S.C. § 342(b) for Individuals Filing for Bankruate box.	ptcy
	choosing to file under		Chapter 7				
		Chapter 11					
			Chapter 12				
			Chapter 13				
about how you ma				ou may pay. Typ attorney is subr	pically, if you are paying the fee y	ck with the clerk's office in your local court for more rourself, you may pay with cash, cashier's check, or half, your attorney may pay with a credit card or che	money
					tallments. If you choose this optos (Official Form 103A).	ion, sign and attach the Application for Individuals to	Pay
☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7							
but is not required to, waive your fee, and may do so only if your income is less than 150% of the official applies to your family size and you are unable to pay the fee in installments). If you choose this option, y							
the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with							
).	Have you filed for bankruptcy within the	■ N	0.				
	last 8 years?	ПΥ	es.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
0.	Are any bankruptcy cases pending or being	■ N	Ю				
	filed by a spouse who is not filing this case with you, or by a business	ΠY	es.				
	partner, or by an affiliate?						
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ N	lo. Go to I	ine 12.			
	residence:	ПΥ	es. Has yo	our landlord obta	ained an eviction judgment agair	st you and do you want to stay in your residence?	
				No. Go to line	12.		
				Yes. Fill out Initial bankruptcy pet		Judgment Against You (Form 101A) and file it with	this

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Document Page 4 of 75 Case number (if known) Debtor 1 Elaine V Sykes Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation. partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Elaine V Sykes

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Elaine V Sykes Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do □ 1-49 **1**,000-5,000 **25,001-50,000** you estimate that you **5001-10,000 5**0,001-100,000 50-99 owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million **\$0 - \$50,000** □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Elaine V Sykes Signature of Debtor 2 Elaine V Sykes Signature of Debtor 1 Executed on February 8, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Elaine V Sykes Document Page 7 of 75 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kevin F	Rouse ARDC	Date	February 8, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Kevin Rou	se ARDC		
Printed name			
Ledford, V	Vu & Borges, LLC		
Firm name			
105 W. Ma	dison		
23rd Floor			
Chicago, I	L 60602		
Number, Street,	City, State & ZIP Code		
Contact phone	312-853-0200	Email address	notice@billbusters.com
#6284394			
Bar number & St	tate		

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Del	otor1 Elaine V Sykes		D000	Case numbe	ſ (if known)
Pal	t6: Answer These Ques	ions for R	eporting Purposes		
16.	What kind of debts do you have?	16a.	Are your debts prima individual primarily for a	rily consumer debts? Consumer debts are defir a personal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		rily business debts? Business debts are debts or investment or through the operation of the busi	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts	you owe that are not consumer debts or busines:	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Ch	papter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	Yes.	I am filing under Chapte are paid that funds will	er 7. Do you estimate that after any exempt prope be available to distribute to unsecured creditors?	erty is excluded and administrative expenses
	administrative expenses		■ No		
	are paid that funds will be available for		☐ Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do you estimate that you owe?	□ 1-49		□ 1,000-5,000	□ 25,001-50,000
		■ 50-99		<u> </u>	□ 50,001-100,000
		☐ 100-19 ☐ 200-9		□ 10,001-25,000	☐ More than100,000
19.	How much do you	\$0 - \$	50.000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,00	01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		LJ \$500,6	001 - \$1 million	□ \$100,000,001 - \$500 mmon	Thiose gail \$50 billios
20.	How much do you	□ \$0 - \$9	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		ا,000چ ت	\$1 million	□ \$100,000,001 - \$500 Hillion	La More trait \$50 billots
Part	7. Sign Below				
For	you	I have ex	amined this petition, and	I declare under penalty of perjury that the inform	ation provided is true and correct.
	,	If I have o	chosen to file under Chap	oter 7, I am aware that I may proceed, if eligible, the relief available under each chapter, and I cho	under Chapter 7, 11,12, or 13 of title 11,
		documen	t, I have obtained and re	did not pay or agree to pay someone who is not ad the notice required by 11 U.S.C. § 342(b).	an attorney to neip me fill out this
		I request	relief in accordance with	the chapter of title 11, United States Code, speci	ified in this petition.
		bankrupto and β571	cy case can result in fines	ment, concealing property, or obtaining money or s up to \$250,000, or imprisonment for up to 20 ye	property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Elaine V Signature		Signature of Debtor	2
		Executed	on January 31, 201	7 Executed on	
			MM / DD / YYYY		DD / YYYY

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Debtor 1 Elaine V Sykes

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Signature of Attorney for Debtor

Date

January 31, 2017 MM / DD / YYYY

Kevin Rouse ARDC

Printed name

Ledford, Wu & Borges, LLC

Firm name

105 W. Madison 23rd Floor

Chicago, IL 60602 Number, Street, City, State & ZIP Code

Contact phone 312-853-0200

Email address

notice@billbusters.com

#6284394

Bar number & State

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·	
Fill in this information to identify your case:	
Debtor 1 Elaine V Sykes	
First Name Middle Name Last Name	
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number	
(if known)	☐ Check if this is an amended filing
•	amended ming
Official Form 106Dec	
Declaration About an Individual Debtor's Schedules	12/15
Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms	?
■ No	
	ankruptcy Petition Preparer's Notice, ion, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declar that they are true and correct:	ation and
Elaine V Sykes Signature of Debtor 1	
-	

Page 11 of 75 (if known) Debtor 1 Elaine V Sykes Bait 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. **48 U/S.C. §§ 152, ∤34/1, 1519, and 3571.** Signature of Debtor 2 Signature of Debtor 1 Date January 31, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? Mo Mo ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Entered 02/08/17 15:34:49

Filed 02/08/17

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Document

M No

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Doc 1

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Debtor 1	Elaine V Sykes	Case number (#	inown)
name: Descrip property securing	•	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
For any un in the info	rmation below. Do not list real esta	perty Leases nat you listed in Schedule G: Executory Contracts and Une nate leases. Unexpired leases are leases that are still in effec perty lease if the trustee does not assume it, 11 U.S.C. § 36	t: the lease period has not vet ended.
Describe	your unexpired personal property	leases	Will the lease be assumed?
Lessor's n Description Property:			□ No.
Lessor's no Description Property:			□ No
Lessor's na Description Property:			□ No
Lessor's na Description Property:			□ No
Lessor's na Description Property:			□ No
Lessor's na Description Property:			□ No
Lessor's na Descriptior Property:			□ No □ Yes
Jnder pensoroperty th	alty of perjury, I declare that I have at is subject to an unexpired lease WWY e V Sykes ture of Debtor 1	indicated my intention about any property of my estate that. X Signature of Debtor 2	
Date	January 31, 2017	Date	

Case 17-03698 Doc 1 Filed 02/08/17 Entered 02/08/17 15:34:49 Desc Main Document Page 13 of 75 Elaine V Sykes Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ For your spouse____ 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00

0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 0.00 0.00 0.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Determine Whether the Means Test Applies to You Part 2: 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 0.00 Multiply by 12 (the number of months in a year) x 12 0.00 12b. The result is your annual income for this part of the form 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. IL Fill in the number of people in your household. 2 Fill in the median family income for your state and size of household. 65,659,00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. 14a. Go to Part 3.

Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2.

Part 3:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Elaine V Sykes Signature of Debtor 1

Date January 31, 2017 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

B2030 (Form 2030) (12/15)

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United States Bankruptcy Court Northern District of Illinois

In re	Elaine V Sykes			Case No.		
			Debtor(s)	Chapter	7	v
	DISCI	LOSURE OF COMPE	NSATION OF ATTOR	NEY FOR D	EBTOR(S)	
C	compensation paid to me	e within one year before the fili	6(b), I certify that I am the attorned and of the petition in bankruptcy, of or in connection with the bank	or agreed to be pai	d to me, for services r	
	_	have agreed to accept	····	\$	1,214.00	
	Prior to the filing of	f this statement I have received		\$	1,214.00	
	Balance Due			\$	0.00	
2. \$	335.00 of the fili	ng fee has been paid.				
3. 1	The source of the compe	ensation paid to me was:				
	■ Debtor □	Other (specify):				
i. 1	The source of compensat	tion to be paid to me is:				
	■ Debtor □	Other (specify):			•	
: 1	Lhave not sorred to	share the above disclosed com-	pensation with any other person u	nless they are mor	nhers and associates c	of my law firm
	_					-
i			sation with a person or persons who mes of the people sharing in the c			law firm. A
5. I	In return for the above-d	disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy	case, including:	
a b c d	 Preparation and filing Representation of the [Other provisions as a Exemption pl 	g of any petition, schedules, state debtor at the meeting of credit needed] anning; preparation and fi	ering advice to the debtor in deter tement of affairs and plan which i ors and confirmation hearing, and ling of reaffirmation agreeme C 522(f)(2)(A) for avoidance	nay be required; I any adjourned he ents and applica	arings thereof;	
'. E	By agreement with the de	ebtor(s), the above-disclosed fe	e does not include the following	service:		
			CERTIFICATION	•		
	certify that the foregoin ankruptcy proceeding.	ng is a complete statement of an	y agreement or arrangement for p	payment to me for	representation of the	debtor(s) in
				9	2	
De	ate		Kevin Rouse ARD		······································	
			Signature of Attorney Ledford, Wu & Bor			
			105 W. Madison	900, ==0		
			23rd Floor Chicago, IL 60602			
			312-853-0200 Fax			
			notice@billbusters	s.com		
			Name of law firm			

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United States Bankruptcy Court Northern District of Illinois

In re	Elaine V Sykes		Case No.	
		Debtor(s)	Chapter	7
	•			
	VERI	FICATION OF CREDITOR M.	ATRIX	
		Number of	Creditors:	38
	The above-named Debtor(s) he (our) knowledge.	creby verifies that the list of creditor	ors is true and	correct to the best of my
Date:	January 31, 2017	Elaine V Sykes Signature of Debtor	ls.	

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Document Page 16 of 75 Fill in this information to identify your case: Debtor 1 **Elaine V Sykes** Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number

☐ Check if this is an amended filing

Official Form 106Sum

(if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	11: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,570.54
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,570.54
Par	2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	78,461.34
	Your total liabilities	\$	78,461.34
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,566.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,562.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nersonal	family or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Page 17 of 75 Case number (if known) Debtor 1 Elaine V Sykes

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	

1,614.50

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	33,744.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	33,744.00

Case 17-03698 Doc 1 Filed 02/08/17 Entered 02/08/17 15:34:49 Desc Main Page 18 of 75 Document Fill in this information to identify your case and this filing: Debtor 1 **Elaine V Sykes** Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No ☐ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Yes. Describe.....

Miscellaneous Used Household Goods including: Sofa, Loevseat, Entertainment center, Television, DVD player, coffee Table, Dining Table & Chairs, China Cabinet, Refrigerator, Microwave, Pots/Pans/Dishes, Coffee Maker, Silverware, Bed, Dresser and **Bookshelves**

\$800.00

Document Page 19 of 75 Debtor 1 , Case number *(if known)* Elaine V Sykes 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... Lap top, Printer, Tablet, Wii Video Game System, Cell Phone, \$1,200.00 **Vacuum and Lamps** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles □ No Yes. Describe..... Books, DVDs, Ikea Artwork \$100.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... **BBQ Grill** \$150.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$300.00 Personal Used Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,550.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

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claims or exemptions.

Case 17-03698 Doc 1 Filed 02/08/17 Entered 02/08/17 15:34:49 Desc Main Document Page 20 of 75 , Case number (if known) Debtor 1 Elaine V Sykes 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **PNC Bank** \$2.00 Checking **Bank of America** \$0.54 17.2. Checking **Husband's Checking Account** \$18.00 Checking 17.3. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Institution name: Type of account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

■ No

■ No

☐ Yes.....

☐ Yes. Give specific information about them...

	Case 17-03698	Doc 1	Filed 02/08/17 Document	Entered 02/08/17 15:34:49 Page 21 of 75_	Desc Main					
Debtor	Elaine V Sykes		Document	Case number (if known)						
Exa ■ N	 Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them 									
Exa ■ N	- ·	isive licenses	ngibles , cooperative association	n holdings, liquor licenses, professional licens	es					
Money	or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.					
28. Tax	refunds owed to you									
■ N □ Y	-	bout them, inc	cluding whether you alre	ady filed the returns and the tax years						
Exa ■ N			usal support, child suppo	ort, maintenance, divorce settlement, property	settlement					
Exa ■ N	benefits; unpaid loans	ity insurance		efits, sick pay, vacation pay, workers' compe	nsation, Social Security					
	•	e insurance; ł	nealth savings account (HSA); credit, homeowner's, or renter's insurar	nce					
■ Y	es. Name the insurance compa Com	any of each p pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:					
		oloyer Term h Surrende	n Life Insurance - No er Value	Rodney Johnson (husband)	\$0.00					
If y sor ■ N	neone has died.			ed surance policy, or are currently entitled to rece	eive property because					
Exa ■ N	amples: Accidents, employmer o	nt disputes, in		it or made a demand for payment s to sue						
	es. Describe each claim									
□N	•		every nature, includin	g counterclaims of the debtor and rights to	set off claims					
,,	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		pated Federal Tax R	efund-	\$0.00					
-										
35. Any	financial assets you did not	already list								

Official Form 106A/B Schedule A/B: Property page 4

■ No

	Case 17-03698	Doc 1	Filed 02/08/17 Document	Entered 0 Page 22 of	2/08/17 15:34:49 75	Desc Main
Debtor 1	Elaine V Sykes				Case number (if known)	
☐ Yes.	Give specific information					
	the dollar value of all of yo art 4. Write that number he					\$20.54
Part 5: De	scribe Any Business-Related	Property You	Own or Have an Interest	In. List any real esta	ate in Part 1.	
37. Do you	own or have any legal or equi	table interest i	n any business-related p	roperty?		
No. Go	to Part 6.					
☐ Yes. (Go to line 38.					
Part 6: De	scribe Any Farm- and Comme ou own or have an interest in fa	ercial Fishing-F rmland, list it in	Related Property You Ow Part 1.	n or Have an Interes	st In.	
46. Do yo t	ı own or have any legal or	equitable in	terest in any farm- or o	commercial fishir	ng-related property?	
■ No.	Go to Part 7.					
☐ Yes	. Go to line 47.					
Part 7:	Describe All Property You C	Own or Have a	n Interest in That You Did	d Not List Above		
53. Do yo u	ı have other property of ar	ny kind you c	lid not already list?			
·	oles: Season tickets, country	club membe	rship			
■ No	0					
⊔ Yes.	Give specific information					
54. Add 1	the dollar value of all of yo	our entries fro	om Part 7. Write that n	umber here		\$0.00
	·					
Part 8:	List the Totals of Each Part of	of this Form				
55 Part 2	1: Total real estate, line 2					\$0.00
	2: Total vehicles, line 5			\$0.00		Ψ0.00
	3: Total personal and hous	sehold items	, line 15	\$2,550.00		
58. Part 4	4: Total financial assets, li	ne 36		\$20.54		
59. Part :	5: Total business-related p	roperty, line	45	\$0.00		
60. Part 6	6: Total farm- and fishing-	related prope	erty, line 52	\$0.00		
61. Part 7	7: Total other property not	listed, line 5	· +	\$0.00		
62. Total	personal property. Add lin	es 56 through	n 61	\$2,570.54	Copy personal property to	stal \$2,570.54
63. Total	of all property on Schedu	le A/B. Add li	ne 55 + line 62			\$2,570.54

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Elaine V Sykes			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify th	e Property	You Claim a	s Exempt

1.	Which set of exemptions are you clain	ning?	Check one only	, even if y	your spouse is	filing with y	ou.
----	---------------------------------------	-------	----------------	-------------	----------------	---------------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own			Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exer	mption.		
Miscellaneous Used Household Goods including: Sofa, Loevseat, Entertainment center, Television, DVD player, coffee Table, Dining Table & Chairs, China Cabinet, Refrigerator, Microwave, Pots/Pans/Dishes, Coffee Maker, Silverware, Bed, Dresser and Bookshelve Line from Schedule A/B: 6.1	\$800.00	■ \$8 100% of fair market valuany applicable statutory		735 ILCS 5/12-1001(b)	
Lap top, Printer, Tablet, Wii Video Game System, Cell Phone, Vacuum and Lamps Line from Schedule A/B: 7.1	\$1,200.00	\$1,2 100% of fair market valuany applicable statutory	· •	735 ILCS 5/12-1001(b)	
Books, DVDs, Ikea Artwork Line from Schedule A/B: 8.1	\$100.00	■ \$1	100.00	735 ILCS 5/12-1001(a)	
		☐ 100% of fair market valu any applicable statutory	· •		

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Case number (if known)

De	Elaille v Sykes			Case number (ii known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Personal Used Clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	735 ILCS 5/12-1001(a)
				100% of fair market value, up to any applicable statutory limit	
	Checking: PNC Bank Line from Schedule A/B: 17.1	\$2.00		\$2.00	735 ILCS 5/12-1001(b)
	Zino nom concedero 702. TTT			100% of fair market value, up to any applicable statutory limit	
	Checking: Bank of America Line from Schedule A/B: 17.2	\$0.54		\$0.54	735 ILCS 5/12-1001(b)
	Line Holli Schedule A/D. 11.2			100% of fair market value, up to any applicable statutory limit	
	Checking: Husband's Checking Account	\$18.00		\$36.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	Employer Term Life Insurance - No Cash Surrender Value	\$0.00		\$0.00	215 ILCS 5/238
	Beneficiary: Rodney Johnson (husband) Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmen	it.)
	No				
	☐ Yes. Did you acquire the property cover	ed by the exemption w	ithin 1	,215 days before you filed this case?	?
	□ No				

☐ Yes

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			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Elaine V Sykes			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this
				amended filin

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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J	430 11 00000 1	Document Document	Page 26 of 75	COO MAIN
Fill in this info	rmation to identify your			
Debtor 1	Elaine V Sykes			
DODIOI 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	NORTHERN DISTRICT OF I	LINOIS	
Case number				
(if known)				Check if this is an
				amended filing
Official For	m 106E/E			
Official For		/ho Have Unsecured	I Claims	12/15
			ITY claims and Part 2 for creditors with NONPRIORITY c	
Schedule G: Exect Schedule D: Cred eft. Attach the Co name and case no	cutory Contracts and Unexp litors Who Have Claims Sec ontinuation Page to this pag umber (if known).	ired Leases (Official Form 106G). ured by Property. If more space is ge. If you have no information to re	list executory contracts on Schedule A/B: Property (Off Do not include any creditors with partially secured clair is needed, copy the Part you need, fill it out, number the eport in a Part, do not file that Part. On the top of any ad	ns that are listed in entries in the
	All of Your PRIORITY Un			
	itors have priority unsecure	d claims against you?		
No. Go to	Part 2.			
☐ Yes.				
	All of Your NONPRIORIT			
3. Do any credi	itors have nonpriority unsec	cured claims against you?		
☐ No. You h	nave nothing to report in this p	art. Submit this form to the court with	h your other schedules.	
Yes.				
unsecured cla	aim, list the creditor separately	y for each claim. For each claim liste	the creditor who holds each claim. If a creditor has more to ded, identify what type of claim it is. Do not list claims already a have more than three nonpriority unsecured claims fill out to	included in Part 1. If more
				Total claim
4.1 Advoc	ate Medical Group	Last 4 digits of ac	count number	\$672.00
•	rity Creditor's Name	When was the deb	ot incurred?	
	ox 92523 go, IL 60675	when was the det	nicured?	
	Street City State Zlp Code	As of the date you	u file, the claim is: Check all that apply	
Who inc	curred the debt? Check one.			
■ Debt	or 1 only	☐ Contingent		
☐ Debt	or 2 only	☐ Unliquidated		
☐ Debt	or 1 and Debtor 2 only	☐ Disputed		
☐ At lea	ast one of the debtors and and	ounci	RITY unsecured claim:	
	ck if this claim is for a com	<u> </u>		
debt Is the cl	aim subject to offset?	☐ Obligations aris report as priority cla	ing out of a separation agreement or divorce that you did no	ot
■ No			on or profit-sharing plans, and other similar debts	
□ Yes		■ Other. Specify	Medical Bill	
— 163		- Other, Specify		

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Case number (if know)

Debtor	1 Elaine V Sykes		Case number (if know)				
4.2	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	1347	\$0.00			
	Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410	When was the debt incurred?	Opened 07/07 Last Active 6/19/08				
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.3	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	7250	\$0.00			
	Po Box 8801 Wilmington, DE 19899	When was the debt incurred?	Opened 6/06/07 Last Active 12/12/08				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.4	CHICAGO FAMILY CENTER Nonpriority Creditor's Name	Last 4 digits of account number		\$821.00			
	556 EAST 115TH STREET Chicago, IL 60628-5740	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another						
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	• •				
	☐ Yes	Other. Specify Medical Bil	l				

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Case number (if know)

Debtor	1 Elaine V Sykes		Case number (if know)	
4.5	Chicago Imaging Assoc. LLC	Last 4 digits of account number	\$865.00	
	Nonpriority Creditor's Name 9410 Compubil Drive	When was the debt incurred?		
	Orland Park, IL 60462 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	no or the date you me, the claim	AS Of the date you me, the claim is. Oneck an that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	Other. Specify Medical	g pians, and other similar debts	
		Other. Specify		
4.6	Citibank/Goodyear	Last 4 digits of account number	9855	\$0.00
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized		Opened 1/18/07 Last Active	
	Bankruptcy	When was the debt incurred?	11/22/10	
	Po Box 790040			
	S Louis, MO 63129			
	Number Street City State ZIp Code	As of the date you file, the claim		
	Who incurred the debt? Check one.	<u>_</u>		
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	\square Debts to pension or profit-sharing		
	Yes	■ Other. Specify Charge Account		
4.7	Citibankna	Last 4 digits of account number	2822	\$0.00
	Nonpriority Creditor's Name	_		· ·
	1000 Technology Dr O Fallon, MO 63368	When was the debt incurred?	Opened 03/05 Last Active 9/05/13	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	•		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify Check Credit Or Line Of Credit		
	— 100	- Other, Specify Officer Clerk	ant Or Enric Or Oredit	

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Case number (if know)

Debtor	1 Elaine V Sykes	Case number (if know)	
4.8	Citifinacial Services, Inc	Last 4 digits of account number	\$12,528.25
	Nonpriority Creditor's Name c/o Baker & Miller PC 29 N Wacker Drive, Ste 500 Chicago, IL 60606-2854	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Personal Loan	
4.9	Citifinancial Nonpriority Creditor's Name	Last 4 digits of account number 8884	\$7,899.00
		When was the debt incurred? Opened 07/08 Last Active 10/14/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Unsecured	
4.1	City of Chicago	Last 4 digits of account number	\$114.68
	Nonpriority Creditor's Name c/o Arnold Scott Harris PC 222 Merchandise Mart Plaza, #1932 Chicago, IL 60654	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	■ Other. Specify Parking Ticket	

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Document Page 30 of 75 Debtor 1 Elaine V Sykes Case number (if know) 4.1 **Comenity Capital Bank** \$1,267.05 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 182025 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 Dept of Ed/Navient 3200 \$0.00 Last 4 digits of account number 2 Nonpriority Creditor's Name **Claims Dept** Opened 3/05/09 Last Active Po Box 9400 When was the debt incurred? 9/12/13 Wilkes-Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 4200 \$0.00 Dept of Ed/Navient Last 4 digits of account number Nonpriority Creditor's Name Opened 9/15/09 Last Active **Claims Dept** Po Box 9400 When was the debt incurred? 1/07/11 Wilkes-Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify

☐ Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Elaine V Sykes Case number (if know) 4.1 Dept of Ed/Navient 6200 \$0.00 Last 4 digits of account number 4 Nonpriority Creditor's Name **Claims Dept** Opened 9/15/09 Last Active Po Box 9400 When was the debt incurred? 1/07/11 Wilkes-Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 \$0.00 Dept of Ed/Navient 5200 Last 4 digits of account number 5 Nonpriority Creditor's Name Claims Dept Opened 9/15/09 Last Active Po Box 9400 When was the debt incurred? 1/07/11 Wilkes-Barr, PA 18773 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 Dept of Ed/Navient 2200 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name **Claims Dept** Opened 3/05/09 Last Active Po Box 9400 When was the debt incurred? 9/12/13 Wilkes-Barr, PA 18773 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify

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Debtor 1 Elaine V Sykes Case number (if know) 4.1 Dept of Ed/Navient 1200 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name **Claims Dept** Opened 3/05/09 Last Active Po Box 9400 When was the debt incurred? 9/12/13 Wilkes-Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Unknown Ditech 3116 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcy Opened 02/07 Last Active Po Box 6172 When was the debt incurred? 8/01/16 Rapid City, SD 57709 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Real Estate Mortgage 4.1 0003 \$12,867.00 **Ecmc** Last 4 digits of account number Nonpriority Creditor's Name 1 Imation Place When was the debt incurred? **Opened 08/13** Bldg 2 Oakdale, MN 55128 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Other. Specify ☐ Yes **Educational Navient Education Loan**

Official Form 106 E/F

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Case number (if know)

Debtor	1 Elaine V Sykes	——————————————————————————————————————	Case number (if know)	
4.2	Emergency Room Providers	Last 4 digits of account number When was the debt incurred?		\$1,709.00
	Nonpriority Creditor's Name PO Box 87618 Chicago, IL 60680			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2	GREGORIO AGLIPAY MD	Last 4 digits of account number		\$373.00
	Nonpriority Creditor's Name 5219 N HARLEM Chicago, IL 60656	When was the debt incurred?		
•	Number Street City State Zlp Code	As of the date you file, the claim		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Medical Bill		
4.2	Hsbc Bank Usa, Na Nonpriority Creditor's Name	Last 4 digits of account number	4695	\$0.00
	Po Box 2013 Buffalo, NY 14240	When was the debt incurred?	Opened 10/29/07 Last Active 6/19/10	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify Credit Card		

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Debtor 1 Elaine V Sykes Case number (if know) 4.2 **ICS/Illinois Collection Service** 2835 \$1,390.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Po Box 1010 When was the debt incurred? **Opened 06/14** Tinley Park, IL 60477 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other, Specify Collection Attorney Talal Sunbulli M.D. ☐ Yes 4.2 Illinois Department of Revenue \$463.09 Last 4 digits of account number 4 Nonpriority Creditor's Name **Bankruptcy Section** When was the debt incurred? P.O.Box 64338 Chicago, IL 60664-0338 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Taxes owed 4.2 Lincoln Tech 0419 \$3,449.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/13/09 Last Active 1 Plymouth Meeting When was the debt incurred? 7/19/12 Plymouth Meeting, PA 19462 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify

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Case number (if know)

Debioi	Liaille v Sykes		Case Humber (II know)	
4.2	Med Business Bureau	Last 4 digits of account number	2495	\$300.00
	Nonpriority Creditor's Name 1460 Renaissance Dr Suite 400	When was the debt incurred?	Opened 03/14	
	Park Ridge, IL 60068 Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	d claim: Iration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin		
	Yes	Other Specify Collection	Attorney Chicago Imaging Ltd	
4.2	Med Business Bureau	Last 4 digits of account number	2500	\$300.00
	Nonpriority Creditor's Name 1460 Renaissance Dr Suite 400	When was the debt incurred?	Opened 03/14	
	Park Ridge, IL 60068 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Collection Attorney Chicago Imaging Ltd		
4.2	Med Business Bureau Nonpriority Creditor's Name	Last 4 digits of account number	2499	\$100.00
	1460 Renaissance Dr Suite 400 Park Ridge, IL 60068	When was the debt incurred?	Opened 03/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other Specify Collection	Attorney Chicago Imaging Ltd	

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Case number (if know)

Debioi	Liaille v Sykes		Case number (ii know)	
4.2	Med Business Bureau	Last 4 digits of account number	2498	\$55.00
	Nonpriority Creditor's Name 1460 Renaissance Dr Suite 400	When was the debt incurred?	Opened 03/14	
	Park Ridge, IL 60068 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	L. L. C.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Chicago Imaging Ltd	
4.3	Med Business Bureau	Last 4 digits of account number	2497	\$55.00
	Nonpriority Creditor's Name 1460 Renaissance Dr Suite 400	When was the debt incurred?	Opened 03/14	
	Park Ridge, IL 60068 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	7.0 0 uuto you, o.u	o. Onook all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	■ No	Debts to pension or profit-sharin		
	☐ Yes	■ Other. Specify Collection Attorney Chicago Imaging Ltd		
4.3	Med Business Bureau	Last 4 digits of account number	2496	\$55.00
1	Nonpriority Creditor's Name			Ψοσ.σσ
	1460 Renaissance Dr	When was the debt incurred?	Opened 03/14	
	Suite 400 Park Ridge, IL 60068			
	Number Street City State Zlp Code	As of the date you file, the claim i		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	□Yes	Other, Specify Collection		

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Debtor 1 Elaine V Sykes Case number (if know) 4.3 Metro Ct. for Health \$2,750.00 Last 4 digits of account number 2 Nonpriority Creditor's Name 500 E. Ogden Ave. When was the debt incurred? Hinsdale, IL 60521 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medial Bill ☐ Yes 4.3 Mgm Medical Associates \$234.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 2425 W. 22nd Street, #210 When was the debt incurred? Oak Brook, IL 60523 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.3 Midnight Velvet 1550 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/10 Last Active 1112 7th Ave When was the debt incurred? 11/28/12 Monroe, WI 53566 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Elaine V Sykes Case number (if know) 4.3 Midwest Diagnostic Pathology \$1,807.00 Last 4 digits of account number 5 Nonpriority Creditor's Name When was the debt incurred? PO Box 578 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.3 Northshore Health System \$3,166.69 Last 4 digits of account number 6 Nonpriority Creditor's Name 2650 Ridge Avenue When was the debt incurred? Evanston, IL 60201 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bill ☐ Yes 4.3 **Northwest Collectors** 0691 \$126.00 Last 4 digits of account number Nonpriority Creditor's Name 3601 Algonquin Rd Ste 232 When was the debt incurred? **Opened 08/11** Rolling Meadows, IL 60008 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Elmhurst Radiologists Other. Specify S.C. ☐ Yes

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Debto	or 1 Elaine V Sykes	—————	Case number (if know)					
4.3	Oaklawn Radiology	Last 4 digits of account number		\$1,448.54				
	Nonpriority Creditor's Name 37241 Eagle Way Chicago, IL 60678	When was the debt incurred?						
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	•						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Medical						
4.3 9	Onemain Financial/Citifinancial	Last 4 digits of account number	1492	\$0.00				
	Nonpriority Creditor's Name 6801 Colwell Blvd		Opened 8/13/07 Last Active					
	Ntsb-2320	When was the debt incurred?	7/31/08					
	Irving, TX 75039	_						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	<u> </u>	☐ Contingent						
	Debtor 1 only							
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.					
	☐ At least one of the debtors and another	Student loans						
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa						
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	■ Other. Specify _ Unsecured						
4.4	Pinnacle Credit Services	Land & distinct of a count mumbers	0001	\$597.00				
0	Nonpriority Creditor's Name	Last 4 digits of account number		ψ337.00				
	Po Box 640	When was the debt incurred?						
	Hopkins, MN 55343 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	,, ,, , ,						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed						
	☐ At least one of the debtors and another	d claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts					
	☐ Yes	Other. Specify 12 Verizon Wireless Cellco Partne						
	☐ Yer							

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Debtor 1 Elaine V Sykes Case number (if know) 4.4 **Pinnacle Credit Services** 9411 \$597.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 640 When was the debt incurred? **Opened 04/14** Hopkins, MN 55343 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Verizon** ☐ Yes Other. Specify Wireless 4.4 \$720.00 Radiology Imaging Consultants Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **PO Box 637** Frankfort, IL 60423 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify Sallie Mae 4200 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Navient Opened 7/25/07 Last Active Po Box 9500 When was the debt incurred? 6/22/10 Wilkes-Barr, PA 18873 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Case number (if know)

4.4 Sallie Mae 0915 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Navient Opened 9/15/09 Last Active Po Box 9500 When was the debt incurred? 6/22/10 Wilkes-Barr, PA 18873 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.4 Unknown Sallie Mae 0915 Last 4 digits of account number Nonpriority Creditor's Name Attn: Navient Opened 09/09 Last Active Po Box 9500 When was the debt incurred? 6/22/10 Wilkes-Barr, PA 18873 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational 4.4 Sallie Mae 0915 Unknown Last 4 digits of account number Nonpriority Creditor's Name Opened 09/09 Last Active Attn: Navient Po Box 9500 When was the debt incurred? 6/22/10 Wilkes-Barr, PA 18873 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify

Debtor 1 Elaine V Sykes

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Debtor 1 Elaine V Sykes Case number (if know) 4.4 Sallie Mae 0305 Unknown Last 4 digits of account number Nonpriority Creditor's Name Attn: Navient Opened 03/09 Last Active Po Box 9500 When was the debt incurred? 09/09 Wilkes-Barr, PA 18873 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.4 Unknown Sallie Mae 0305 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Navient Opened 03/09 Last Active Po Box 9500 When was the debt incurred? 09/09 Wilkes-Barr, PA 18873 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational Sallie Mae 0305 Unknown Last 4 digits of account number Nonpriority Creditor's Name Attn: Navient Opened 03/09 Last Active 09/09 Po Box 9500 When was the debt incurred? Wilkes-Barr, PA 18873 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify

Official Form 106 E/F

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Case number (if know)

4.5 Sallie Mae 0002 \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Navient Opened 06/89 Last Active When was the debt incurred? 7/25/07 Po Box 9500 Wilkes-Barr, PA 18873 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.5 \$0.00 Sallie Mae 0001 Last 4 digits of account number Nonpriority Creditor's Name Attn: Navient Opened 04/89 Last Active Po Box 9500 When was the debt incurred? 7/25/07 Wilkes-Barr, PA 18873 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational 4.5 Southwest Laboratory Phys. \$34.90 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **Dept 729288** Chicago, IL 60678-9288 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical

Debtor 1 Elaine V Sykes

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Debtor	1 Elaine V Sykes		Case number (if know)	
4.5	Stroger Hospital	Last 4 digits of account number		\$2,282.00
	Nonpriority Creditor's Name 1900 W. Polk Ste G-9	When was the debt incurred?		
	Chicago, IL 60612 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Medical Bil		
4.5	Synchrony Bank / HH Gregg Nonpriority Creditor's Name	Last 4 digits of account number	9832	\$0.00
	Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 1/05/07 Last Active 3/18/08	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		d claim: aration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other. Specify Charge Ac	count	
4.5	Talal Sunbulli MD GI Associates Nonpriority Creditor's Name	Last 4 digits of account number		\$1,390.00
	10500 S Cicero Ave Oak Lawn, IL 60453 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	in Observation with the same of	
	Who incurred the debt? Check one.		із: Спеск ан тпат арріу	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	□ Debts to pension or profit-sharin		

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Debtor 1 Elaine V Sykes Case number (if know) 4.5 Us Dept Ed 1913 \$6,326.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Po Box 1030 When was the debt incurred? **Opened 02/09** Coraopolis, PA 15108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.5 **Us Dept Ed** 3707 \$4,383.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1030 When was the debt incurred? **Opened 02/09** Coraopolis, PA 15108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational 4.5 Us Dept Ed 1911 \$3,163.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1030 When was the debt incurred? **Opened 02/09** Coraopolis, PA 15108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Elaine V Sykes Case number (if know) 4.5 Us Dept Ed 1919 \$1,478.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Po Box 1030 When was the debt incurred? **Opened 09/09** Coraopolis, PA 15108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.6 **Us Dept Ed** 3710 \$1,339.00 Last 4 digits of account number Λ Nonpriority Creditor's Name Po Box 1030 When was the debt incurred? **Opened 09/09** Coraopolis, PA 15108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational 4.6 Us Dept Ed 1916 \$739.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1030 When was the debt incurred? **Opened 09/09** Coraopolis, PA 15108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Verizon Wireless	Last 4 digits of account number	\$597.1
Nonpriority Creditor's Name		
1515 Woodfield Rd.	When was the debt incurred?	
Schaumburg, IL 60173	As of the date you file the plains in Oberland All that are he	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Utility	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Tatal Olaim
	6f.	Student loans	6f.	\$	Total Claim 33,744.00
Total				· —	
claims from Part 2	6a.	Obligations arising out of a separation agreement or divorce that			
	-3-	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	44,717.34
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	78,461.34

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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		D(W)	311 1 MW. +0 W 10	
Fill in this infor	mation to identify your	case:		
Debtor 1	Elaine V Sykes			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Lillie R Sykes 2042 East 83rd Street Chicago, IL 60657 Case 17-03698 Doc 1 Filed 02/08/17 Entered 02/08/17 15:34:49 Desc Main

		Docume	<u>nt Page 49 d</u>	<u>)f 75 </u>	
Fill in this	s information to identify your	case:			
Dahtar 4	Elda VO L				
Debtor 1	Elaine V Sykes First Name	Middle Name	Last Name		
Dobtor 2	i iist ivaille	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
(-1	3,				
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
_					
Case nun	nber			Chook if the	io io on
(II KIIOWII)				Check if thi	
				amended fi	iiirig
Official	J Form 106U				
	al Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
people are	e filing together, both are equ	ally responsible for supp	lying correct informat	s complete and accurate as possible. If two ion. If more space is needed, copy the Addi	itional Page,
	and number the entries in the e and case number (if known			o this page. On the top of any Additional Pa	ages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
■ No					
	thin the last 8 years, have yoo na, California, Idaho, Louisiana			y? (Community property states and territories in top, and Wisconsin)	include
Alizo	na, California, Idano, Louisiana	, inevada, inew iviexico, Fu	eno Rico, Texas, Wash	rigion, and wisconsin.)	
■ No	o. Go to line 3.				
	es. Did your spouse, former spo	use or legal equivalent live	with you at the time?		
□ 16	s. Dia your spouse, former spo	use, or legal equivalent live	with you at the time?		
3. In Co	olumn 1, list all of your codeb	tors. Do not include your	spouse as a codebtor	if your spouse is filing with you. List the pe	erson shown
				sure you have listed the creditor on Schedu	
	ı 106D), Schedule E/F (Officia Column 2.	I Form 106E/F), or Sched	ule G (Official Form 10	6G). Use Schedule D, Schedule E/F, or Sch	edule G to fill
out C	Joiumn 2.				
	Column 1: Your codebtor			Column 2: The creditor to whom you ov	we the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedules that apply:	
				_	
3.1				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
	•				
3.2	Nome			Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your c	ase:				
Del	otor 1 Elaine V Syl	ces				
	otor 2					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS			
(If kr	se number		-	☐ A supp	is is: ended filing element showing postpetition chap ome as of the following date:	oter
	fficial Form 106I			MM / D	DD/ YYYY	
S	chedule I: Your Inc	ome				12/15
atta	use. If you are separated and you ch a separate sheet to this form. T1: Describe Employment Fill in your employment			d case numbe		
	information.				<u> </u>	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed	_	imployed Not employed	
	employers.	Occupation	Home Health Care	CSA	A Agent	
	Include part-time, seasonal, or self-employed work.	Employer's name	Have a Heart Home Health		ta Airlines	
	Occupation may include student or homemaker, if it applies.	Employer's address	1523 Otto Blvd Chicago Heights, IL 60411		5 N.W. Boulevard neapolis, MN 55441	
		How long employed t	here? 5 years		16	:
Par	t 2: Give Details About Mor	nthly Income				
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to report for any	line, write \$0 ir	n the space. Include your non-filin	g
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information for all empl	oyers for that p	person on the lines below. If you r	eed
				For Debtor 1	For Debtor 2 or	

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 520.00 5,965.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 520.00 5,965.00

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	Elaine V Sykes	_	Case num	ber (if known)			
	Cor	y line 4 here	4.	For Deb	520.00	For Debto		
_	•			·		·	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
5.	5a. 5b.	all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$	43.00	\$	0.00	
	5c. 5d. 5e.	Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance	5c. 5d. 5e.	\$ \$ \$	0.00 0.00 43.00	\$ \$ \$	619.00 369.00 16.00	
	5f. 5g. 5h.	Domestic support obligations Union dues Other deductions. Specify: Garnishment Chapter 13 Plan Delta Stock	5f. 5g. 5h.+	\$ \$ \$ \$	0.00 0.00 0.00	\$ \$ - \$ \$	0.00 810.00 108.00	
		Short Terrm Disablity DL Stock	 	\$	0.00	\$	62.00 108.00	
6. 7.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. 7.	\$ \$	86.00		1,190.00	
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Link:	8a. 8b. nt 8c. 8d. 8e.	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g. 8h.+	\$ 	0.00	\$ - \$	0.00	7
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	357.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	79	91.00 + \$_	1,775.00	= \$	2,566.00
11.	Incli othe	te all other regular contributions to the expenses that you list in <i>Schedu</i> ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ur depend			ed in <i>Schedu</i>	le J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certiles					\$	2,566.00
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	m?				monthly	

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Fill i	n this informa	ition to identify yo	our case:			I		
Debt		Elaine V Syk					k if this is: An amended filing	
Debt							J	ving postpetition chapter
` '	use, if filing)		NODE	IEDN DIOTDIOT OF ILL IN	010	_		ine following date.
Unite	ed States Bankr	ruptcy Court for the	: NORTE	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number nown)							
Of	ficial Fo	rm 106J						
Sc	hedule	J: Your	Exper	ises				12/15
info	rmation. If m		eded, atta	. If two married people anch ch another sheet to this n.				
Part		ribe Your House	hold					
1.	Is this a joir							
			in a separ	ate household?				
	□N	0	-					
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debt	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
					-			☐ Yes ☐ No
								☐ Yes
3.		oenses include		No			- 	
		f people other t d your depende		Yes				
Part	2: Estim	ate Your Ongoi	na Monthi	v Expenses				
Esti exp	mate your ex	cpenses as of you	our bankrı	uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
(Offi	icial Form 10)6l.)					Your exp	enses
4.		or home owners		ses for your residence. I	nclude first mortgag	e 4. \$		800.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's				4b. \$		35.00
		maintenance, re owner's associat	•	upkeep expenses dominium dues		4c. \$ 4d. \$		0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

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Debtor	1 Elaine V Sykes	Case num	ber (if known)	
S. U	tilities:			
66		6a.	\$	205.00
6l	•	6b.		30.00
60	, , , , ,	6c.		0.00
60		6d.	·	110.00
0.	Cell phone		\$	125.00
, _	ood and housekeeping supplies		·	
	hildcare and children's education costs	7. 8.	\$	500.00
			·	0.00
	lothing, laundry, and dry cleaning	9.		100.00
	ersonal care products and services	10.		100.00
	edical and dental expenses	11.	\$	75.00
	ransportation. Include gas, maintenance, bus or train fare.	12.	¢	300.00
	o not include car payments.		·	
	ntertainment, clubs, recreation, newspapers, magazines, and books		·	0.00
	haritable contributions and religious donations	14.	\$	40.00
-	surance.			
	o not include insurance deducted from your pay or included in lines 4 or 20. 5a. Life insurance	150	œ.	0.00
		15a.	·	0.00
	5b. Health insurance	15b.		0.00
	5c. Vehicle insurance	15c.		90.00
	5d. Other insurance. Specify:	15d.	\$	0.00
S	axes. Do not include taxes deducted from your pay or included in lines 4 or 20. pecify:	16.	\$	0.00
	stallment or lease payments:			
	a. Car payments for Vehicle 1	17a.	·	0.00
17	b. Car payments for Vehicle 2	17b.	\$	0.00
17	c. Other. Specify:	17c.	\$	0.00
1.7	7d. Other. Specify:	17d.	\$	0.00
8. Y	our payments of alimony, maintenance, and support that you did not report as		_	0.00
	educted from your pay on line 5, Schedule I, Your Income (Official Form 106l).	18.	· -	0.00
9. O	ther payments you make to support others who do not live with you.		\$	0.00
	pecify:	19.		
	ther real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
20	Da. Mortgages on other property	20a.	\$	0.00
20	b. Real estate taxes	20b.	\$	0.00
20	Oc. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20	Od. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20	De. Homeowner's association or condominium dues	20e.	\$	0.00
1. O	ther: Specify: Husband's Storage fee	21.	+\$	52.00
				92.60
	alculate your monthly expenses			
	2a. Add lines 4 through 21.		\$	2,562.00
22	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,562.00
3. C	alculate your monthly net income.			
	Ba. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2.566.00
	Bb. Copy your monthly expenses from line 22c above.	23b.	· -	2,562.00
`		200.	*	2,302.00
2:	8c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	4.00
4. D Fo	o you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your odification to the terms of your mortgage? No. Yes. Explain here:			ise or decrease because of a

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Fill in this in	formation to identify your	case:			
Debtor 1	Elaine V Sykes				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	Filst Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case numbe	ır				
(if known)					☐ Check if this is an
					amended filing
Official F	orm 106Dec				
Declar	ation About a	n Individua	I Debtor's S	Schedules	12/15
f two marrie	d people are filing together	r, both are equally resp	onsible for supplying	correct information.	
					ement, concealing property, or 00, or imprisonment for up to 20
	h. 18 U.S.C. §§ 152, 1341, 1		initiapicy case can les	uit iii iiiles up to \$230,0	oo, or imprisonment for up to 20
	Sign Below				
Did you	ı pay or agree to pay some	one who is NOT an atte	orney to help you fill o	ut bankruptcy forms?	
■ No)				
☐ Ye	es. Name of person				nkruptcy Petition Preparer's Notice,
				Declaration	n, and Signature (Official Form 119)
Under p	enalty of perjury, I declare	that I have read the su	mmary and schedules	filed with this declarati	on and
	y are true and correct.		•		
X /e/ l	Elaine V Sykes		Х		
	ine V Sykes			e of Debtor 2	
	nature of Debtor 1		S.g.iatai		
J					
Date	February 8, 2017		Date		

HII	in this inform	ation to identify you	. casa.				
			case.				
Deb	tor 1	Elaine V Sykes First Name	Middle Name	Last N	ame		
	tor 2 use if, filing)	First Name	Middle Name	Last N	ame		
			NORTHERN DISTRICT		arric		
Unit	eu States ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Cas (if kno	e number					_	Check if this is an amended filing
	ficial For		Affairs for Indivi	duals Fi	ling for B	ankruptcy	4/16
infor num	mation. If mo ber (if known)	ore space is needed,). Answer every ques	attach a separate sheet to stion.	this form. O	n the top of an	equally responsible for sup y additional pages, write yo	
	-	current marital statu	rital Status and Where You s?	u Lived Beio	<u> </u>		
	■ Married □ Not marr	ied					
2.	During the la	st 3 years, have you	lived anywhere other than	where you l	ive now?		
	■ No □ Yes. List	all of the places you li	ved in the last 3 years. Do n	ot include wh	ere you live now	ı.	
	Debtor 1 Price	or Address:	Dates Debtor 1 lived there	De	ebtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
						ity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Mak	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (C	official Form 1	06H).		
Part	Explain	the Sources of You	r Income				
	Fill in the total	amount of income yo	nployment or from operation u received from all jobs and have income that you receive	all businesse	s, including part		ndar years?
	□ No ■ Yes. Fill i	n the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	Gross ind (before de exclusion	eductions and	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	last calendar nuary 1 to Dec	year: cember 31, 2016)	■ Wages, commissions, bonuses, tips		\$4,650.00	■ Wages, commissions, bonuses, tips	\$66,301.90
			☐ Operating a business			☐ Operating a business	

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Page 56 of 75 Case number (if known) Debtor 1 Elaine V Sykes

					Debtor 1		Debtor 2	
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
					☐ Wages, commissions, bonuses, tips	\$-928.57	☐ Wages, commissions, bonuses, tips	
					Operating a business		☐ Operating a business	
			dar year be December	efore that: 31, 2015)	■ Wages, commissions, bonuses, tips	\$5,256.00	■ Wages, commissions, bonuses, tips	\$0.00
					☐ Operating a business		☐ Operating a business	
			dar year: December	31, 2014)	■ Wages, commissions, bonuses, tips	\$9,442.00	■ Wages, commissions, bonuses, tips	\$0.00
					☐ Operating a business		☐ Operating a business	
	List e	each s	,	the gross inco	se and you have income that yome from each source separat	,	•	
	_							
	_				Debtor 1		Debtor 2	
	_				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
	or the c		dar year: December	31, 2014)	Sources of income	each source (before deductions and	Sources of income	(before deductions
(J	or the canuary	List List No.	December Certain Paris Debtor 1's Neither Dindividual During the No. Yes * Subject Debtor 1	ayments You s or Debtor 2 bebtor 1 nor I primarily for a e 90 days befor Go to line 7 List below a paid that or not include to adjustment or Debtor 2 or	Sources of income Describe below. Unemployment Made Before You Filed for It is debts primarily consumer Debtor 2 has primarily consumer personal, family, or household pre you filed for bankruptcy, dientification.	each source (before deductions and exclusions) \$371.25 Bankruptcy r debts? Imer debts. Consumer debts Id purpose." d you pay any creditor a total d a total of \$6,425* or more in the for domestic support obligations bankruptcy case. Is after that for cases filed on our other cases filed on our other cases.	Sources of income Describe below. are defined in 11 U.S.C. § 10 of \$6,425* or more? n one or more payments and to ations, such as child support after the date of adjustment	(before deductions and exclusions) 11(8) as "incurred by an the total amount you and alimony. Also, do
(Ja	or the canuary	List List No.	December Certain Paris Debtor 1's Neither Dindividual During the No. Yes * Subject Debtor 1	ayments You s or Debtor 2 bebtor 1 nor I primarily for a e 90 days befor Go to line 7 List below a paid that or not include to adjustment or Debtor 2 or	Unemployment I Made Before You Filed for I I's debts primarily consumer Debtor 2 has primarily consumer Debtor 3 has primarily consumer Debtor 4/01/19 and every 3 years Debtor 4/01/19 and every 3 years Debtor 4/01/19 and every 3 years Debtor 5 have primarily consumer Described below.	each source (before deductions and exclusions) \$371.25 Bankruptcy r debts? Imer debts. Consumer debts Id purpose." d you pay any creditor a total d a total of \$6,425* or more in the for domestic support obligations bankruptcy case. Is after that for cases filed on our other cases filed on our other cases.	Sources of income Describe below. are defined in 11 U.S.C. § 10 of \$6,425* or more? n one or more payments and to ations, such as child support after the date of adjustment	(before deductions and exclusions) on (8) as "incurred by an the total amount you and alimony. Also, do
(Ja	or the canuary	List List No.	December Certain Pa Debtor 1's Neither Dindividual During the No. Yes * Subject Debtor 1 During the	ayments You s or Debtor 2 betor 1 nor I primarily for a e 90 days befor Go to line 7 List below paid that or not include to adjustment or Debtor 2 or e 90 days befor Go to line 7 List below include pay	Unemployment I Made Before You Filed for I I's debts primarily consumer Debtor 2 has primarily consumer Debtor 3 has primarily consumer Debtor 4/01/19 and every 3 years Debtor 4/01/19 and every 3 years Debtor 4/01/19 and every 3 years Debtor 5 have primarily consumer Described below.	each source (before deductions and exclusions) \$371.25 Bankruptcy r debts? Imer debts. Consumer debts Id purpose." d you pay any creditor a total d a total of \$6,425* or more in the for domestic support obligations bankruptcy case. s after that for cases filed on a timer debts. d you pay any creditor a total d a total of \$600 or more and	Sources of income Describe below. are defined in 11 U.S.C. § 10 of \$6,425* or more? n one or more payments and tations, such as child support a or after the date of adjustment of \$600 or more? the total amount you paid tha	(before deductions and exclusions) 21(8) as "incurred by an the total amount you and alimony. Also, do to total amount you are total a

paid

still owe

Case 17-03698 Doc 1 Filed 02/08/17 Entered 02/08/17 15:34:49 Desc Main Document Page 57 of 75 Case number (if known) Debtor 1 Elaine V Sykes Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Amount you Dates of payment Total amount Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? 9 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property **Explain** what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο ☐ Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person

Describe the gifts

Dates you gave the gifts

Value

Person to Whom You Gave the Gift and Address:

Official Form 107

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14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600
Charitus Name

	Yes. Fill in the details for each gift or contr	ribution.		
	Gifts or contributions to charities that tota more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pai	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?	y or since you filed for bankruptcy, did y	ou lose anything because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.			
	how the loss occurred Inc	scribe any insurance coverage for the local clude the amount that insurance has paid. Local clude the amount that insurance claims on line 33 of Schedule A/B:	ist pending loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prepinclude any attorneys, bankruptcy petition prepinclude. No Yes, Fill in the details.	paring a bankruptcy petition?		erty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any propertransferred	Date payment or transfer was made	Amount of payment
	The Law Offices of Ledford, Wu and Borge 105 W. Madison 23rd Floor Chicago, IL 60602	\$1214.00 paid prior to case fili	ng 9/2016	\$1,200.00
17.	Within 1 year before you filed for bankrupto: promised to help you deal with your credito Do not include any payment or transfer that you	rs or to make payments to your creditor		erty to anyone who
	Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any propertransferred	erty Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupte transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial affairs? ade as security (such as the granting of a se		
	Person Who Received Transfer	Description and value of	Describe any property or	Date transfer was
	Address	property transferred	payments received or debts paid in exchange	made

Person's relationship to you

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Debtor 1 **Elaine V Sykes**

19.	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p		ny property to a	a self-settle	ed trust or similar device	e of which you are a
	NoYes. Fill in the details.					
	Name of trust	Description and v	value of the pro	perty tran	sferred	Date Transfer was
						made
Par	18: List of Certain Financial Accounts, I	nstruments, Safe Deposi	t Boxes, and S	torage Uni	its	
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asset	or other financial accou	nts; certificates	s of depos		
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository cash, or other valuables?			sitory for securities,		
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit	t or place other than your	r home within 1	l year befo	ore you filed for bankrup	otcy?
	No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)		Do you still have it?			
Par	9: Identify Property You Hold or Control	ol for Someone Else				
23.	Do you hold or control any property that s for someone.	omeone else owns? Incl	ude any propei	rty you boı	rrowed from, are storing	រុ for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental In	formation				
For	he purpose of Part 10, the following defini	tions apply:				
	Environmental law means any federal, state	te, or local statute or reg	ulation concer	ning pollut	tion, contamination, rele	eases of hazardous or

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Elaine V Sykes

24.	Has any governmental unit notified you that No	t you may be liable or potentially liab	le under or in violation of an environme	ntal law?		
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of	,				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any en	vironmental law? Include settlements a	nd orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	11: Give Details About Your Business or	Connections to Any Business				
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have a	any of the following connections to any	business?		
	☐ A sole proprietor or self-employed i	n a trade, profession, or other activity	y, either full-time or part-time			
	☐ A member of a limited liability comp	any (LLC) or limited liability partners	hip (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing ex	ecutive of a corporation				
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation	n			
	■ No. None of the above applies. Go to F	Part 12.				
	Yes. Check all that apply above and fill	in the details below for each busines	ss.			
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Do not include Social Security n	umber or ITIN.		
		Name of accountant of bookkeeper	Dates business existed	Dates business existed		
	E's Designs 2042 E. 83rd Street	Homemade bath & Designs	EIN:			
	Chicago, IL 60617		From-To June 2015 to Prese	nt		
	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statemen	t to anyone about your business? Inclu	de all financial		
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

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Debtor 1 Elaine V Sykes Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Elaine V Sykes Elaine V Sykes Signature of Debtor 2 Signature of Debtor 1 Date February 8, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

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			· ·	
Fill in this infor	mation to identify your	case:		
Debtor 1	Elaine V Sykes			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number _ (if known)				☐ Check if this is an amended filing
Official Fo		n for Indiv	viduals Filing Under Chap	oter 7 12/15
creditors have least you must file this whiches on the	ever is earlier, unless th form	ur property, or and the lease has n vithin 30 days after he court extends th	ot expired. you file your bankruptcy petition or by the date e time for cause. You must also send copies to	the creditors and lessors you list
	eople are filing togethe nd date the form.	r in a joint case, bo	th are equally responsible for supplying correc	ct information. Both debtors must
	and accurate as possik our name and case nu		s needed, attach a separate sheet to this form.	On the top of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims		
1. For any credit		art 1 of Schedule D	: Creditors Who Have Claims Secured by Prop	erty (Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the property t secures a debt?	hat Did you claim the property as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of	:		Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:			Retain the property and [explain]:	
scouring debt.	•			

Official Form 108

Creditor's

Creditor's

Description of

securing debt:

Description of

securing debt:

name:

property

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Surrender the property.

☐ Surrender the property.

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 \square Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Reaffirmation Agreement.

☐ No

☐ Yes

□ No

☐ Yes

☐ No

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Debtor 1	Elaine V Sykes	Case number (if known)	
proper	ption of ty ng debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□Yes
in the info	ormation below. Do not list real estate	rty Leases t you listed in Schedule G: Executory Contracts and Unexpired e leases. Unexpired leases are leases that are still in effect; the rty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property lea	ases	Will the lease be assumed?
Lessor's Description Property:	on of leased		□ No
Lessor's Description Property:	on of leased		□ No
Lessor's Description Property:	on of leased		□ No □ Yes
Lessor's Description Property:	on of leased		□ No □ Yes
Lessor's Description Property:	on of leased		□ No
Lessor's Description Property:	on of leased		□ No □ Yes
Lessor's Description Property:	on of leased		□ No
		ndicated my intention about any property of my estate that sec	
	that is subject to an unexpired lease.		
Ela	Elaine V Sykes ine V Sykes nature of Debtor 1	XSignature of Debtor 2	
Date	February 8, 2017	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-03698 Doc 1 Filed 02/08/17 Entered 02/08/17 15:34:49 Desc Main Document Page 68 of 75

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Elaine V Sykes		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	NSATION OF ATTOI	RNEY FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,214.00
	Prior to the filing of this statement I have received			1,214.00
	Balance Due			0.00
2.	\$335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows.			
6.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspect	s of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Exemption planning; preparation and filing of motions pursuant to 11 USC 	ement of affairs and plan which ors and confirmation hearing, ar ing of reaffirmation agreen	may be required; and any adjourned hear nents and applicat	rings thereof;
7.	By agreement with the debtor(s), the above-disclosed fee	e does not include the following	g service:	
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.		payment to me for re	epresentation of the debtor(s) in
ı	February 8, 2017	/s/ Kevin Rouse A	ARDC	
	Date	Kevin Rouse ARI		
		Signature of Attorne Ledford, Wu & Bo	•	
		105 W. Madison	•	
		23rd Floor Chicago, IL 60602	2	
		312-853-0200 Fa		
		notice@billbuste		
		Name of law firm		

Case 17-03698 LEDFORD, WU & BORGES, LLC Doc 1

105~W. Madison, $23^{rd}\,Floor,$ Chicago, 1L 60602

(312)853-0200 Fax: (312)873-4693

Attorney signature:

Document Page 69 of 75 ATTORNEY RETENTION CONTRACT

Client No. 5 29

Responsible attorney: 1

1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford &	ż Wu
and its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of any inconsisten	юу.

The state of the case of the c
2. Services and Fees: Client retains Attorney for the following services: □ Chapter 7 (prepetition service only): \$ □ PLUS \$335 filing fee (court cost) Client retains Attorney for the sole purpose of preparing and filing a Chapter 7 bankruptcy petition (without the required summary schedules and statements). Attorney's duty to further counsel and represent Client ends, and the attorney-client relationship is terminated at the end of the first week after commencement of the case, unless the parties enter into a separate retention contract for postpetition (services within that period. If no such contract is executed, Attorney may file a motion to withdraw from the case. □ Chapter 7 (service through discharge): \$ □ PLUS \$335 filing fee (court cost) TOTAL: \$ □ To be paid by: □ TOTAL: \$ □ TOTAL
(a) Attorney will counsel and represent Client in all aspects of the above matter(s) EXCEPT: (1) adversary proceedings; (2) § 72 redemption; (3) judicial lien avoidance; (4) post-discharge litigation; (5) appeals; (6) other:
4. Initial Consultation. Client acknowledges that Attorney has explained the following (please initial): Your Description of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2 Your Description of Experiment of Exp
5. Client's Duties. Client agrees, during the course of representation, to: (a) provide Attorney with full, accurate and timely information, financial and otherwise; (b) follow Attorney's procedures and cooperate with Attorney in providing requested documents; (c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty; (d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit card or line of credit, or using an existing credit card or line of credit; and (e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.
6. Co-counsel. Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ one or more of the following outside counsel, at Attorney's expense, to work on this case: Kathleen W. Vaught, Kelly M. Johnson, Wayne J. Skelton, Christina Banyon, David Hall Carter, and
7. Termination. Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a pankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will be provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, Client will be reimburse Attorney for any expenses, including those that otherwise would be free of charge, and Client authorizes Attorney to apply the filing fee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein.
Date: 9/12/204

ARDC# 6316317

Desc Main

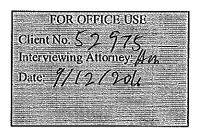
BILLBUSTERS

Ledford, Wu and Borges, LLC

Attorneys at Law

105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

CONSULTATION AGREEMENT



THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
- 3. Client's Duties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
- 4. Services: The attorney agrees to provide Client with the following services:
 - a. analyzing Client's financial circumstances based on information provided by Client;
 - b. to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;
 - if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client's
 options, informing Client what additional information Client needs to provide in order to enable Attorney to
 provide such advice and information;
 - d. where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and

e. to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client
5. Fees (check one):
A consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-clien relationship shall terminate at the conclusion of the interview
Client agrees to pay \$ in nonrefundable consultation fee
In the event Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charged for the case, and a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signed by Client and Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detailed explanation of the parties' obligations and a breakdown of the costs.
6. Acknowledgement: Client acknowledges that the first date upon which Attorney provided any bankruptcy assistance to Client is the date noted above, and that Attorney provided Client with a copy of this agreement and the disclosure and information mandated by Section 527(b) of the Bankruptcy Code.
x Elaino V. Sylles x Date: 9 1/2/16
Attorney Signature: ARDC #: 63/67

United States Bankruptcy Court Northern District of Illinois

Not then District of Inmois					
In re	Elaine V Sykes		Case No.		
		Debtor(s)	Chapter	7	
	VI	ERIFICATION OF CREDITOR M	MATRIX		
		Number of	f Creditors:	38	
	The above-named Debtor(s (our) knowledge.) hereby verifies that the list of credi	itors is true and co	orrect to the best of my	
Date:	February 8, 2017	/s/ Elaine V Sykes Elaine V Sykes			

Advocate Medical Group P.O. Box 92523 Chicago, IL 60675

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Barclays Bank Delaware Po Box 8801 Wilmington, DE 19899

CHICAGO FAMILY CENTER 556 EAST 115TH STREET Chicago, IL 60628-5740

Chicago Imaging Assoc. LLC 9410 Compubill Drive Orland Park, IL 60462

Citibank/Goodyear Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

Citibankna 1000 Technology Dr O Fallon, MO 63368

Citifinacial Services, Inc c/o Baker & Miller PC 29 N Wacker Drive, Ste 500 Chicago, IL 60606-2854

Citifinancial

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